

Department of Social Services
Division of Behavioral Health
3900 W Technology Circle, Suite 1
Sioux Falls, SD 57106

Plan of Correction

Program Name:Southern Plains Behavioral HealthDate Submitted:Date Due:03/18/202104/03/2021

Client Chart POC-1

Rule #: 67:62:08:07

Rule Statement: Treatment Plan. The initial treatment plan shall be completed within 30 days of intake and shall include the mental health staff's signature, credentials, and date of signature, and the clinical supervisor's signature and credentials if the mental health staff does not meet the criteria of a clinical supervisor as defined in subdivision 67:62:01:01(8). Evidence of the client's or the client's parent or guardian's participation and meaningful involvement in formulating the plan shall be documented in the file. This may include their signature on the plan or other methods of documentation.

The treatment plan shall:

- 1. Contain either goals or objectives, or both, that are individualized, clear, specific, and measurable in the sense that both the client and the mental health staff can tell when progress has been made;
- 2. Include treatment for multiple needs, if applicable, such as co-occurring disorders that are relevant to the client's mental health treatment;
- 3. Include interventions that match the client's readiness for change for identified issues; and
- 4. Be understandable by the client and the client's family if applicable.

A copy of the treatment plan shall be provided to the client, and to the client's parent or guardian if applicable.

Area of Noncompliance: Four files indicated substance use needs in their assessments. Three out of four of those files did not include goals to address substance use in their treatment plans. Treatment plans need to include goals and treatment for co-occurring disorders, such as substance use, in their treatment plans if applicable.

Corrective Action (policy/procedure, training, environmental changes, etc): Staff were informed of the POC and the need to include goals to address substance use in the treatment plan at the March 5, 2021 staff meeting. When completing the treatment plan and a client indicates that they would like to address substance use or co-occurring needs, staff will refer for substance abuse services and/or provide information and education on available resources and supports. Staff will continue to make goals and objectives client driven and the treatment plan goals will indicate if the client is wanting to address substance use through SPBHS services. Staff will be informed of this correction at the March 19, 2021 all staff meeting, and the POC will be reviewed in the next 3 staff meetings.

Supporting Evidence: Staff meeting notes will indicate the discussion and plan of correction made to ensure substance use treatment is addressed as a client driven treatment plan goal. Staff meeting notes are uploaded in a shared file so all staff can reference as needed.

Anticipated Date Achieved/Implemented:

Date March 2021 staff made aware of the POC and reviewed throughout March and April 2021, ongoing monitoring by Clinical Director.

Person Responsible: Executive Director and Clinical Director

How Maintained: Staff read and sign off that they have read the State Contract and Attachments annually, so they are informed of the requirement. The Clinical Director will monitor assessments and treatment plans to watch for compliance.	Board Notified: Y⊠ N□ n/a□

Please email or send Plan of Correction to:

Lindly McCattley 3/29/2021

Accreditation Program
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